

HISTORICAL SOCIETY OF CAMP HILL

Membership Application

Member \$10 _____
Family \$20 _____
Supporting \$50 _____

additional gift \$ _____

Name: _____
(please print)

Address: _____

Phone: _____ e-mail: _____

Make Checks payable to: HSCH send to: HSCH, c/o 2145 Walnut Street, Camp Hill, PA 17011



*Thank you
for your
support*

Historical Society of Camp Hill
c/o 2145 Walnut Street
Camp Hill, PA 17011